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Rural District of Daventry



# ANNUAL REPORT

OF THE

Medical Officer of Health

FOR THE

Year 1964

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**JOAN M. ST. V. DAWKINS,**  
Medical Officer of Health.



**To: The Chairman and Members of the Rural District Council  
of Daventry**

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present my ninth Annual Report as Medical Officer of Health, incorporating that of the Public Health Inspector. The Report takes a similar form each year, and is presented in five sections, each dealing with an aspect of the environmental control of the District. In addition the Medical Officer is afforded the annual opportunity to make some observations and reflections on the trends which may be inimical to positive health.

The District presents an attractive rural countryside with virtually no atmospheric pollution, the main industry being agriculture. Each year, further schemes for sewage disposal are completed, the few remaining slums replaced by modern housing, and older properties improved with grants. The District is fortunate in having an excellent piped water supply provided by the Mid Northamptonshire Water Board. A very dry year has resulted in a shortage, and it must be remembered that the provision of ample sanitary facilities and sewage disposal brings with it a considerable addition to the consumption of water.

The sewerage schemes for Everdon and Charwelton would have been finished but for a setback in the completion, the contractors being unable to fulfil their contract. The scheme at Welton was completed, while that at Norton was practically finished at the end of the year. Slum clearance proceeded, though in the villages which lack building land some necessary schemes must be deferred. The Council have now dealt with 688 houses in the nine and a half years since the two original five-years plans were formulated. These proposed to deal with 522 houses and this figure has been well surpassed in under the ten years. Often a tenant of an unfit house is let a Council house which becomes vacant, thus saving the Council the necessity of building to replace the property.

The vital statistics for the year show that there were 181 deaths—21 fewer than last year. This gives a standardised rate of 10.61—well below the national figure of 11.3. Male deaths exceeded female deaths by nine. Details and comments on the causes of death are given on later pages.

The total number of births was 299, a fall of seven on last year's figure; and 13 were illegitimate—nine fewer than last year's high number of 22. It is to be hoped that the illegitimate birthrate will continue to decline.

Infections show a satisfactory fall, especially in the diseases which once gave cause for anxiety. There were no serious outbreaks and there was only one case of dysentery and a few single cases of food poisoning. Measles notifications fell, this disease continuing to exhibit its biennial incidence.

The deaths from respiratory infections continue to fall and there was only one death from tuberculosis, though nine died from bronchitis and eight from pneumonia, the majority of these from older age groups. It is well to remember that it is only in the last decade and a half that the scourge of tuberculosis has been conquered.

The statistics for immunisation are now included with the total of the County Council figures, and are not broken down for individual districts. The local figures are, therefore, no longer available. It is necessary, however, to stress annually in this Report, the need for parents to continue to have their children immunised to diphtheria, tetanus, whooping cough, poliomyelitis and smallpox, and in the early teenagers to tuberculosis. It is only by the maintenance of a high level of immunisation in the community that these diseases continue to be prevented.

A gradual and satisfactory environmental control of disease is being achieved, and it is now necessary to assess the present trends in living which are the enemies of health. Many of the pressures, considered in the past to be the causes of human misery, have been lifted and the community is increasingly able to afford and be in receipt of extra benefits. That these benefits may themselves be the cause of further human misery must give us pause in the complacent hope that we are achieving a Utopian society.

The prevention of ill-health and unhappiness will be increasingly in the power of the individual himself, and the choice made will depend to some degree on the knowledge that he possesses, and the guidance given him in the use of this knowledge. The doctors' duty, particularly those whose practice lies in prevention, should include that of health educator. This Report, once of necessity a statistical analysis of environmental control, may now additionally be used for the purpose of health education. I endeavour each year, therefore, to lay stress on matters relating to general health as well as those that are purely of local concern.

Man may soon be named not *homo sapiens* but renamed a new species: *homo sedentarius*—a being whose calorie intake far exceeds his energy output and who, as a result, will become specially prone to those degenerative diseases that appear to be increasing in prosperous societies. The consumption of concentrated carbo-hydrate has only lately been considered as a factor which may contribute to—or even cause—early degenerate changes, or disease in the body, among which arterial disease resulting in coronary thrombosis and strokes, diabetes, obesity and dental decay may at present be cited. Other morbid conditions yet unknown may similarly be related to chemical additives, hormones and antibiotics in the diet.

The motor-car, both by causing accidents and lack of physical exercise resulting from its increasing use, is another hazard in our lives. In this country last year over 7,000 were killed and many more thousands injured. Each year, this figure rises, and if a world total of killed and mutilated was assessed, it would be seen that more have suffered as a result of the motor vehicle than from wars over many years. It is a sad reflection that the development of mental maturity is far behind the ingenuity necessary for the invention of machines.

Deaths from accidents in the home maintain a similar high figure. In this case, the majority involved are the young and the elderly.

The incidence of lung cancer rises annually. Last year, there were 24,434 deaths from cancer of the lung. In 1939 there were 6,214 deaths. The relationship between cancer of the lung and heavy cigarette smoking is now accepted and unimpeachable. Yet smoking continues and many young



people start this habit each year. Were these deaths caused by unchecked infectious disease, there would be a national outcry and a clamour that such an outrage had not been prevented. Yet when action is left to individual choice, the habit remains and the death rate continues to rise. It is the duty of all who influence the young to show by their own example that smoking is harmful. Parents, doctors and teachers who smoke heavily cannot hope that children will not follow their example.

Finally, in the field of mental health, there appears, despite the benefits of the Welfare State, to be little sign that mental and psychiatric illness are diminishing. The increase in delinquency and crime the divorce rate and the high figure of convictions for cruelty to young children indicate that a community, though experiencing ever-increasing material prosperity, still lacks stability. The causes here are more complex and the remedies may be obscure. Perhaps living can become too easy and without the stimulation of the necessity for endeavour, a society may gradually decline.

In conclusion, I wish to thank the members of the Public Health Department for their excellent work during the year, and for their help in the compilation of this report. In addition, I wish to extend my grateful thanks to the Chairman of the Council and the Chairmen of the Housing and Public Health Committees for their help and encouragement.

Finally, I express my appreciation of the County Medical Officer of Health for his ready co-operation in supplying relevant information.

I have the honour to be

Your obedient Servant,

JOAN M. St. V. DAWKINS,

Medical Officer of Health

Council Offices,  
Church Walk,  
DAVENTRY.  
Telephones: Daventry 2184-5

# Daventry Rural District Council

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## **Members of the Housing and Public Health Committees :—**

Chairman of Housing Committee : Mr. Councillor H. A. Malin.

Chairman of Public Health Committee : Mr. Councillor S. Allen.

Messrs. Councillors J. W. Anscomb, J.C., C.A. (Chairman of the Council); J. O. Adams, J.P; S. Allen; Mrs. G. Atterbury; C. E. Browne, M.B.E; H. E. Burdett; E. R. Buswell; A. J. Checkley; Rev. Canon E. J. A. Dunn (Vice-Chairman of the Council); S. K. Foster; F. Harris; R. B. Harris; Rev. G. E. Hooper; H. A. Hupfield; J. R. Hutt; T. E. Jones; Mrs. R. E. Lucas; H. A. Malin; Major J. K. Maxwell; W. J. Preece, C.C; Rev. M. T. Porteous; Rev. S. F. W. Powell; R. H. Quiney; F. W. Robinson; T. W. Russell; H. Seal; G. Thorpe; W. J. Webb; the late Mrs. D. E. Williams; F. W. Wright; and Rev. H. T. Yeomans.

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## **Public Health Officers of the Council**

Medical Officer of Health :

Dr. J. M. St. V. Dawkins, M.B.B.S, D.P.H., D.C.H.

Also holds appointment of

Medical Officer of Health, Daventry Borough and Brixworth Rural District;

Assistant County Medical Officer of Health and County School Medical Officer.

Public Health Inspector :

J. M. Harkness, R.S.I.J.B., M.A.P.H.I.

Additional Public Health Inspector: B. K. L. Doughty, M.A.P.H.I., A.M.I.P.C

Public Health Inspector's Assistant :

B. C. Lines

## SUMMARY OF VITAL STATISTICS FOR 1964

Area (in acres)	79,243
Population (mid-year estimated by Registrar-General)	17,050
Number of separte dwellings occupied	6,021
Number of caravans occupied	42
Rateable Value	£410,658. 0. 0.
Product of a penny rate	£ 1,627. 3. 6.

### Vital Statistics

Live Births: 299. Live Birth Rate per 1,000 population	17.53
Still Births: 5. Still Births Rate per 1,000 live and still births	16.67
Total Live and Still Births: 304	
Infant Deaths: 5 Legitimate.	
Infant Mortality Rate per 1,000 live births	16.67
Infant Mortality Rate per 1,000 live births, legitimate	17.48
Infant Mortality Rate per 1,000 live births, illegitimate	nil
Neo-Natal Mortality Rate per 1,000 live births	16.7
Illegitimate Live Births per cent of total live births	4.5%
Maternal Deaths (including abortion)	nil
Maternal Mortality Rate per 1,000 live and still births	nil

Live Births (rate per 1,000 total population)				Rate for England and Wales	
	Male	Female	Total	Rate	
Legitimate	145	141	286		
Illegitimate	7	6	13		
	<hr/>	<hr/>	<hr/>		
	152	147	299	17.53	18.4

Still Births (rate per 1,000 live and still births)				Rate for England and Wales	
	Male	Female	Total	Rate	
Legitimate	3	2	5		
Illegitimate	—	—	—		
	<hr/>	<hr/>	<hr/>		
	3	2	5	16.67	16.3

Deaths (rate per 1,000 total population)				Rate for England and Wales	
	Male	Female	Total	Rate	
All Causes	95	86	181	10.61	11.3

**Maternal Mortality :** nil. 0.28

**Deaths from Infectious Diseases :** nil.

**Infant Mortality:** There were 5 deaths, 1 male and 4 females; 3 deaths occurred under 1 week of life and 2 deaths under 1 year of life. This gave a rate of 16.7 as compared with 12.8 the previous year.

	Male	Female	Total	Rate	Rate for England and Wales
Legitimate	1	4	5		
Illegitimate	—	—	—		
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	1	4	5	16.7	20.0

## SUMMARY OF VITAL STATISTICS FOR PREVIOUS YEARS

Year	Estimated Population	Births		Deaths		All Ages	
		No.	Crude	Under No.	1 year Rate	No.	Rate
1948	15,850	281	17.6	6	21.0	167	10.60
1949	15,900	250	15.7	14	56.0	217	16.10
1950	15,840	255	16.0	5	19.6	190	11.90
1951	16,290	274	16.9	4	14.6	201	12.30
1952	16,440	236	14.3	7	29.6	182	11.07
1953	16,480	252	15.29	7	27.7	162	9.83
1954	16,590	257	15.27	2	7.7	202	12.1
1955	16,550	222	13.3	5	22.5	185	11.21
1956	16,490	265	16.09	5	22.5	185	11.21
1957	16,450	269	16.35	5	18.58	197	11.97
1958	16,370	267	16.3	9	33.7	196	11.36
1959	16,480	248	15.05	3	11.8	185	11.2
1960	16,190	251	15.5	5	19.9	188	11.6
1961	15,830	249	15.7	2	8.0	186	11.7
1962	16,050	276	17.9	2	7.2	188	11.09
1963	16,520	306	18.52	4	12.8	202	12.23
1964	17,050	299	17.53	5	16.7	181	10.61



CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE DURING 1964 IN THE RURAL DISTRICT OF DAVENTRY

CAUSE OF DEATH		AGE IN YEARS												
		Sex	Total All Ages	4 weeks										
				Under 4 weeks	and under 1 year	1—	5—	15—	25—	35—	45—	55—	65—	75 & over
1. Tuberculosis, Respiratory	F	1	—	—	—	—	—	—	—	—	—	—	—	1
10. Malignant Neoplasm, Stomach	M	3	—	—	—	—	—	—	—	—	—	—	2	1
11. Malignant Neoplasm, Lung, Bronchus	M	7	—	—	—	—	—	—	—	—	—	—	2	—
12. Malignant Neoplasm, Breast	F	2	—	—	—	—	—	—	—	—	—	—	1	—
13. Malignant Neoplasm, Uterus	F	1	—	—	—	—	—	—	—	—	—	—	—	—
14. Other Malignant and Lymphatic Neoplasms..	M	8	—	—	—	—	—	—	—	—	—	—	3	2
15. Leukaemia, Aleukaemia	F	11	—	—	—	—	—	—	—	—	—	—	5	—
16. Diabetes	F	1	—	—	—	—	—	—	—	—	—	—	—	1
17. Vascular Lesions of Nervous System	M	10	—	—	—	—	—	—	—	—	—	—	2	7
18. Coronary Disease, Angina	F	17	—	—	—	—	—	—	—	—	—	—	4	12
19. Hypertension with Heart Disease	M	20	—	—	—	—	—	—	—	—	—	—	1	8
20. Other Heart Disease	F	17	—	—	—	—	—	—	—	—	—	—	6	—
21. Other Circulatory Disease	M	11	—	—	—	—	—	—	—	—	—	—	1	1
22. Influenza	F	8	—	—	—	—	—	—	—	—	—	—	2	7
23. Pneumonia	M	4	—	—	—	—	—	—	—	—	—	—	1	4
24. Bronchitis	M	5	—	—	—	—	—	—	—	—	—	—	1	1
25. Other Diseases of Respiratory System	F	3	—	—	—	—	—	—	—	—	—	—	3	3
29. Hyperplasia of Prostate	M	8	—	—	—	—	—	—	—	—	—	—	—	1
31. Congenital Malformations	M	2	—	—	—	—	—	—	—	—	—	—	—	1
32. Other Defined and Ill-defined Diseases	M	1	—	—	—	—	—	—	—	—	—	—	1	—
33. Motor Vehicle Accidents	F	6	1	—	—	—	—	—	—	—	—	—	4	—
34. All Other Accidents	F	6	2	—	—	—	—	—	—	—	—	—	1	2
35. Suicide	F	1	—	—	—	—	—	—	—	—	—	—	—	—
TOTAL ALL CAUSES	M	95	1	2	—	—	—	—	—	—	—	—	5	34
	F	86	—	—	—	—	—	—	—	—	—	—	4	46

## SECTION A.

### NATURAL AND SOCIAL CONDITIONS

The District is largely rural, and though the principal occupation is agriculture, the great majority of the working population are, however, employed in industry either at Daventry, Rugby, Banbury, Northampton or Coventry. A railway depot of considerable size is situated at Woodford Halse though its future is doubtful. At Weedon there is a large Ordnance Depot, but this was expected to close in February of next year. There are a number of small light engineering factories in the District, but the Boot and Shoe industry, which has formerly employed large numbers particularly out in Long Buckby, has steadily declined. A new engineering factory was ready for production in Long Buckby, and a potato crisp factory also in that parish, has created some employment. The London—Birmingham Motorways extend through the District from Flore to the Warwickshire border, while work was nearing completion on the extension of the Motorway from Crick northwards into Leicestershire. There are large service cafes and filling stations on each side of the Motorway at Watford Gap, employing numbers of male and female workers. There is a low accident rate on the Motorway.

**Area:** The area of the District is 79,243 acres, or 124.2 square miles, which gives an average of one person to 4.6 acres or 136 persons to the square mile.

**Population:** The Registrar-General's figure of estimated population at mid-year was 17,050, showing a considerable increase on the figure for 1963, and this total was probably increased by the end of the year with the completion of more private houses. The majority of persons occupying these new houses came from outside the District. The natural increase in population, i.e., excess of births over deaths was 108.

**Deaths :** The total recorded was 181, showing a decrease of 21 compared with the figure for 1963. The standardised death rate for 1964 was 9.97 compared with 11.3 for England and Wales. The standardised rate is calculated from the Registrar-General's comparability figure (0.45) which makes allowance for age and sex distribution of the population in different areas, and is adjusted specifically to take into account the presence of any residential institution in the area.

**Births :** The number was 299, showing a decrease of seven compared with the previous year, and giving a standardised birth rate of 20.16 (calculated on the Registrar-General's comparability figure, 1.15), compared with 18.4 for England and Wales per 1,000 of the total population.

**Still-Births :** The figure for 1964 was the same as for 1963, it being five, and gave a rate of 16.67 per 1,000 live and still-births.

**Illegitimate Births :** There was a fall in the number to 13 as compared with 22 the previous year.

**Maternal Mortality :** No death was recorded.

**Infant Mortality:** The number of children under one year who died was

5, an increase of 1 on the previous year, and three deaths occurred in the first week of life.

**Causes of Infant Deaths:** One boy of three hours-prematurity; one girl of 8 hours-prematurity; 1 girl of 12 hours-atelectasis; 1 girl of 8 weeks-asphyxia and 1 girl of 11 months-pericarditis due to broncho-pneumonia.

This year the Registrar General has listed the Causes of Death in the groups of under 1 year, then in quincades to 15, and thereafter in decades of 75 and over. Male and female deaths are also shown.

The vital statistics for the year show that there were 181 deaths—21 fewer than last year. This gives a standardised rate of 9.7 compared with the national figure of 11.3. Male deaths exceeded female deaths by 9. The great preponderance of deaths from diseases of the heart and circulation is once more evident, making a total of 94, of which 37 died from coronary disease alone, while 30 died from other heart disease and a further 27 from vascular lesions of the nervous system.

Diseases of the heart and circulation constitute, once again, over half the total deaths. Cancer remains the second highest cause of death, this year taking 34 persons, a decrease of 9 on last year. Thus diseases of the heart and circulation together with cancer cause 75% of the total deaths.

The trend of principal causes of death continues, therefore, towards the mainly degenerative and neoplastic conditions, and away from infectious disease, now largely controlled by the wide number of antibiotic and other drugs. However, it can be seen that 51 persons out of a total of 181 deaths died before the age of 65. The causes of their deaths were predominantly either due to accidents, arterial disease or cancer.

Accidents in the home are all preventable, yet last year over 7,000 died as a result of such accidents, and no doubt countless thousands were injured. Those affected are usually the the young and the aged. Mothers of young children need always to be on the look-out for hazards, particularly in relation to burns and scalds, accidental poisoning and electricity. The aged have the problem of failure of sight, hearing, smell and balance, and their environment needs organising to combat these deficiencies.

Deaths as a result of road accidents are mounting in all civilised countries. In addition, thousands are crippled every year. The benefit which the internal combustion engine has given to mankind is now becoming a hazard. Unless a more mature mental attitude can be inculcated in drivers, the toll of deaths and injured will rise annually as the numbers of vehicles on the roads increase. The angry, careless, selfish individual when driving a motor can be a serious menace and the great majority of accidents would not occur if each driver resolved that such failures in temperament would not occur. The accident rate in society is indeed a gauge of its mental maturity.

The great majority of deaths are caused, however, by the degenerative diseases. People are living longer and the afflictions of old age are more evident. However, in a prosperous, well-fed and largely sedentary society, the emergence of early degenerative disease is now becoming significant. The consumption of highly refined, high calorie foods, far removed from natural



diet, together with a sedentary life, the motor car once again playing an insidious and evil role, when even leisure may be passively spent, is causing a definite increase in the early incidence of arterial disease, particularly in men. The high incidence of diabetes may also be related to this cause. In the endeavour to detect the aetiology of the diseases of civilisation one might look for the grosser departures of living habits from the natural order of things. The concentration of carbohydrate has recently been suggested as a possible malefactor in this respect, and it should be borne in mind that carbohydrate occurring in nature is almost always blended with bulky quantities of cellulose and fibre. So far, those advising on diet have not emphasised the need for wholegrain cereals in preference to refined cereals. It has been found that in primitive societies degenerative disease, obesity and hypertension are seldom seen, but if they become urbanised and live on a Western diet which includes white bread, fish and chips, sweets and aerated water, a high incidence of these diseases occurs.

Finally, there are the deaths the cause of which as yet evade us. These are largely the group of cancers. There remains one condition, that of cancer of the lung, which has been proved to have a relationship with cigarette smoking. Last year, 24,434—a further increase of 1,000—people died as a result of such cancer. Seven were from this district. Yet cigarette smoking declines little. It is the duty of every parent, teacher, and those who influence the young to see that every succeeding generation of young people are aware of the hazards that await them when they start regular smoking.



# STATISTICS SHOWING POPULATION AND NUMBERS OF OCCUPIED HOUSES IN EACH PARISH OF THE DISTRICT

Parish	Population			Number of Private Houses	Occupied Council Houses	Houses Total
	1931 census	1951 census	1961 census			
Ashby St. Ledgers	210	196	142	52	—	52
Badby	440	478	483	123	66	189
Barby	471	536	427	170	44	214
Braunston	1015	1161	1198	276	180	456
Brockhall	38	34	29	8	—	8
Byfield	868	796	838	179	132	311
Canons Ashby	49	42	23	10	—	10
Catesby	91	85	80	28	—	28
Charwelton	165	166	157	43	8	51
Clay Coton	71	51	54	12	4	16
Crick	681	728	780	274	63	337
Dodford	238	216	162	48	5	53
Elkington	69	62	53	18	—	18
Everdon	406	420	364	109	20	129
Farthingstone	177	174	145	52	8	60
Fawsley	29	21	29	13	—	13
Flore	786	896	927	275	106	381
Hellidon	148	160	141	54	4	58
Kilsby	501	558	666	157	71	228
Lilbourne	209	241	227	81	29	110
Long Buckby	2325	2316	2368	632	221	853
Newnham	356	383	358	125	32	157
Norton	315	265	243	115	—	115
Preston Capes	156	167	162	54	6	60
Stanford	53	43	36	12	—	12
Staverton	319	361	365	82	30	112
Stowe-IX-Churches	219	180	151	60	4	64
Watford	324	281	236	75	8	83
Weedon	1750	1734	1489	299	207	506
Welton	358	381	364	108	51	159
West Haddon	714	704	770	205	64	269
Whilton	216	168	171	57	10	67
Winwick	153	89	92	33	—	33
Woodford Halse	1740	1764	1775	419	206	625
Yelvertoft	349	462	451	139	46	185
	<hr/> 16009	<hr/> 16293	<hr/> 15956	<hr/> 4397	<hr/> 1624	<hr/> 6021

## SECTION B.

### GENERAL PROVISIONS OF HEALTH AND WELFARE SERVICES

**Laboratory Service :** The Public Health Laboratory Service operating at the General Hospital, Northampton, was available for the diagnosis and analysis of specimens relative to infectious disease, and also for the bacteriological examination of water samples, and was free of cost to the authority. A helpful and efficient service is provided, and we thank Dr. Hoyle for his constant co-operation.

**Ambulance Service :** A local ambulance, under the control of the County Council, is used for cases occurring in the District.

**Nursing in the Home, Midwives and Health Visitor Service :** These are provided directly by the County Council, who have their nurses living in various parishes in the District.

**The Home Help Service:** Also provided by the County Council, in operation in various parishes in the District. It is a very necessary service and affords considerable benefit to the community, both to domiciliary maternity cases, and in the case of old people who can remain comfortably at home, and whom, without this help, would be in institutions.

**Child Welfare Centres and Clinics :** Infant Welfare Clinics were held at Long Buckby, Weedon, West Haddon, and Woodford Halse. Transport facilities were provided by the County Council in various parts of the District for mothers and children to attend clinics at a nearby centre. In addition the villages of Lilbourne, Yelvertoft, Stanford-on-Avon, Welton, Elkington, Winwick, Charwelton, Norton, Staverton, Everdon, Preston Capes, Badby, and Newnham have access to the mobile caravan clinic, which was instituted to give clinic service to areas previously lacking this amenity.

**Hospitals :** Those suffering from infectious disease were treated at Harborough Road Isolation Hospital, Northampton. Sufferers from tuberculosis who required institutional treatment were sent either to Creton or Rushden House Sanatoria. The majority went to Creton.

All other general and surgical cases were treated at Northampton General Hospital, Danetre Hospital, Horton Infirmary, Banbury, or Hospital of St. Cross, Rugby. The continued treatment of patients at Danetre Hospital has been beneficial to the District, for patients and friends alike.

## WELFARE OF THE AGED

**National Assistance Act, 1948 and National Assistance (Amendment) Act, 1951:** No action was necessary under section 47 during the past year.

The following provide services for old people :

### 1. National Health Service

- (a) General Practitioner
- (b) Hospital and Specialist Services, including the Almoner Service.

### 2. The County Council

#### (a) The Health Department

- (i) District Nurses
- (ii) Health Visitors
- (iii) Home Help Service. The Home Help Service is of inestimable value in the prevention of breakdown in the aged, and many are able to remain in their own homes who would otherwise have to be removed to institutions. Several old people were kept under observation during the year.

#### (b) The Welfare Department

- (i) Part III accommodation and homes
- (ii) Special Services for the Blind, etc., and home fittings where necessary

### 3. The National Assistance Board

Financial help where necessary

### 4. The District Council

Homes for the aged, flats, and in some cases flatlets with Warden supervision.

### 5. Voluntary Organisations

These are many and services vary in different areas. They include holiday schemes in which old people are taken on seaside holidays in off-season times; the Darby and Joan Clubs; "Meals on Wheels" Service; the Home Visiting. The Women's Voluntary Service very often undertake many of the above duties, while in other areas local voluntary committees run the various organisations. The Rural Communities' Council, together with the Old People's Welfare Committee, provide co-operation between the various services

Your Medical Officer of Health, having a special interest in the welfare of the aged, and by virtue of her appointment both to the District and the County Council, and by her relationship with other medical colleagues, endeavours to fulfil the function of co-operation and co-ordination between these many agencies. Many cases of breakdown can be prevented by early application of these services.

Voluntary organisations have also requested your Medical Officer to give lectures and talks, and each invitation received is accepted and fulfilled.



CRICK DARBY & JOAN CLUB : *Report kindly supplied by Mrs. M. B. Spencer*—"We have had a very happy year in the Club, which continues to thrive. Membership is now 65 and it keeps growing. We have had several travel talks and slides, visits from other clubs and, as usual, plenty of outings. We visited the pantomime in Coventry and 'My Fair Lady' in Birmingham. Crick Rovers Football Club staged a wonderful fancy-dress game on Boxing Day and collected a good sum of money which they donated to the Darby & Joan Club. A Bring and Buy Sale brought in another nice amount of money. We have lost three 'Darbies' during the year, but no 'Joans'. Our large committee continues to dispense wonderful teas. The officers are: Leader, Mrs. M. B. Spencer; Deputy, Miss Priestley; Secretary, Mrs. Pettegree, and Treasurer, Mrs. T. Smith."

LONG BUCKBY DARBY & JOAN CLUB. *Joint Secretaries : Mrs. F. E. Kingston, Mrs. B. Underwood.* Report for 1965—This Club has been running for seventeen years and we have again had a most successful year due to the hard working and enthusiastic Committee and to the generous interest in the Club shown by all branches of the village. The Soccer Self Supporters Club gave all the members a wonderful supper—presents for all with button-holes and caps—and they entertained them with games and dances. Mr. Christie of the "King's Head" held his annual Flower Show in aid of the Club and presented them with about £70 which enabled us to run the Club successfully. Many outings, mystery trips, theatre shows etc., and a week's holiday in Clacton for 17 members have been enjoyed throughout the year in addition to the normal meeting activities of whist, cribbage and film shows. Our Christmas party was a great success; the Women's Institute provided an excellent entertainment, as did also the Baptist Chapel Ladies. The Chiropodist still visits the Club twice a month for which service the members pay half-a-crown. Our membership is still about 150 and we average about 60 to 70 at our meetings. Each member receives a Birthday card, and fruit and flowers etc. are sent to the sick. The three clergymen of the various churches visit the Club frequently, and the doctors and the District Nurse are most helpful. We have three bath-chairs for the use of our members. This year we have already had one Golden Wedding and we hope to have another one on 26th June this year. We have also had a wedding of two of our members which took place at our Parish Church.

WEEDON DARBY & JOAN CLUB : *Chairman, Mrs. M. Beard, who gave this report*—"The meetings take place every fortnight and are much enjoyed by all concerned. There are over 90 members but, naturally, not all can attend due to sickness or infirmity or sojourn in hospital; these persons are visited by other members in their homes. At the meetings the members play whist or bingo, for which sweets and chocolates are provided free. It usually ends up with a sing-song. The chiropodist is kept very busy; members pay 3/- and the club the remainder. Private visits are more costly. Outings were arranged to Woodhouse Eaves; the members particularly love this trip—there is usually a farmhouse tea. We had mystery trips. At Christmas we had a lovely party and 80 members sat down to a good Christmas meal. We had entertainment from the St. James Darby & Joan Choir and each member received a gift before going home. In March we celebrated our 7th birthday and enjoyed a nice meat and salad tea. The Long Buckby Women's Institute entertainers came along and gave us a wonderful time; their songs suited



those present admirably. Many are now knitting squares for bed covers, etc. It is thought that probably 12 members will go on the holiday to Clacton in 1965."

WEST HADDON W.V.S. DARBY & JOAN CLUB : *Treasurer, Mrs. I. E. Crawley, who gave this report*—"Our membership of the Darby & Joan Club is 56, as against 47 last year, so we feel we are a thriving Club. Outings last year included Coach trips with tea to Nottingham and surrounding countryside, Leamington, and as today, now that Spring is here, a trip around our own beauty spots, taking in Hollowell, Ravensthorpe and Pitsford Reservoirs. We have many concerts and talks illustrated with coloured slides during the year, as well as housey-housey, etc. Fifteen members are going to Clacton this year on the County Welfare's Annual Holiday—they love it. They also appreciate the Chiropody Service which is well patronised. Last Christmas we had a Turkey Dinner followed by an excellent Concert, gifts and a prize out of a raffle for every member of the Club. Our W.V.S. enjoy the Club as much as the members, and we also appreciated, and many attended, the Rally at Overstone Park when our Chairman, Lady Reading, came to see us."

WOODFORD-CUM-MEMBRIS DARBY & JOAN WELFARE COMMITTEE : The Woodford-cum-Membris Darby & Joan Welfare Committee has, with the help of other organisations in the Village, been able to extricate itself from the financial difficulties of last year. Very generous help was afforded us and coupled with a reduction in the frequency of our Chiropody Sessions, so reducing cost, a very useful balance in hand is reported. Steps have been taken to ensure that the people needing a more frequent service will receive it. Members of the Darby & Joan Club have helped by increasing their contribution to the expense of running the Club. Unfortunately, one of the ways they helped was to forego one of their usual outings, but it is hoped that this will not occur again. The average attendance at the fortnightly meetings continues at about the same level but it is also continuing to be a problem to find people able and willing to entertain at meetings. If there is a solution to this problem we have not found it but we keep trying.—J. W. Anscomb, J.P., C.A., Chairman.

SECTION C.

SANITARY CIRCUMSTANCES OF THE DISTRICT

**Water Supplies :** All parishes of the District, with the exception of Ashby St. Ledgers, have mains water supplies under the Mid-Northamptonshire Water Board. The supply at Ashby St. Ledgers is privately owned and controlled. It is now only the very isolated cottages and farms which do not have a mains supply, and each year shows more connections to these outlying dwellings. The problem is one of economics. There are generally an adequate supply of water of good quality, although during the summer the Board did have to restrict the use of water for certain projects. The mains supply is under constant treatment by chlorination and is regularly analysed by the Board. The imperative necessity for proper sewage disposal works in the villages with a now abundant water supply cannot be too strongly emphasised.

Enquiries made as to condition of supplies ...	...	...	62
Number of samples sent for analysis ...	...	...	8
All these samples were satisfactory on analysis. Two came from wells.			

# STATISTICS SHOWING HOUSES WITH PIPED OR NON-PIPED WATER SUPPLIES

	PIPED SUPPLY		NON-PIPED SUPPLY
	No. of Houses with Laid-on Supply	Stand Tap Supply	No. of Houses with Private Well
Ashby St. Ledgers	44	3	5
Badby	168	14	7
Barby	207	2	5
Braunston	432	15	9
Brockhall	6	—	2
Byfield	300	2	9
Canons Ashby	6	—	4
Catesby	24	—	4
Charwelton	46	—	5
Clay Coton	14	—	2
Crick	324	5	8
Dodford	43	4	6
Elkington	10	—	8
Everdon	125	—	4
Farthingstone	52	6	2
Fawsley	9	—	4
Flore	364	9	8
Hellidon	55	—	3
Kilsby	224	—	4
Lilbourne	106	—	4
Long Buckby	835	8	10
Newnham	153	—	4
Norton	93	14	8
Preston Capes	57	—	3
Stanford	10	—	2
Staverton	108	—	4
Stowe-IX-Churches	44	14	6
Watford	72	5	6
Weedon	495	5	6
Welton	151	5	3
West Haddon	247	14	8
Whilton	46	15	6
Winwick	32	—	1
Woodford Halse	618	2	5
Yelvertoft	170	11	4
	<hr/> 5,589 <hr/>	<hr/> 153 <hr/>	<hr/> 179 <hr/>

## SEWAGE DISPOSAL, SEWERAGE AND DRAINAGE

The year saw the schemes at Everdon and Charwelton held up through default of the contractors, who had previously made satisfactory progress, giving evident reason to hope the schemes would be completed. However, a halt was called, and the Council had then to try to obtain another contractor to complete the works. The scheme at Norton was practically completed, with only a few items still remaining outstanding. It was hoped that the Farthingstone scheme would start in the new year. This is a joint scheme with Litchborough, a neighbouring village in the Towcester Rural District. The Public Health Committee will endeavour to provide sewage works in other parishes, but the upward trend in costs has brought a very heavy financial burden to the Council and the Committee, while fully aware of the necessity for further schemes, must have regard to expenditure. The following table shows the parishes of the District which have proper sewage schemes:—

Ashby St. Ledgers	Newnham
Badby	Staverton
Barby	Watford
Braunston	Weedon Bec
Byfield	Welton
Crick	West Haddon
Flore	Winwick
Kilsby	Woodford Halse
Long Buckby	Yelvertoft
Lilbourne	

Certain reconstruction works were to be started on the Crick works in the coming year.

The general drainage in all the sewered parishes was satisfactory, although in one or two parishes the existing sewage disposal plants require modernisation of an urgent nature, since the building of new homes has meant an increased flow to the works, and some are not now capable of dealing efficiently with this increase. In those parishes with no sewers, the general drainage position is not so satisfactory, although a number of properties have their own septic tanks.



## DETAILS OF OTHER DUTIES OF THE PUBLIC HEALTH DEPARTMENT

**Eradication of Bed Bugs.**—No cases were brought to notice.

**Disinfection and Disinfestation :** No cases of disinfection were carried out, but several wasps' and bees' nests were destroyed at the request of residents.

**The Caravan Sites and Control of Development Act, 1960 :** Four new licenses were granted during the year, each for a single caravan. All licences with the exception of the Long Buckby site are for single caravans only. It was thought that 42 caravans were being occupied throughout the District. None has given any cause for complaint.

**Pests Act, 1949 :** The scheme continued to operate with success. The operative worked on a part-time basis on pests work and refuse collection. There was an increase in the number of visits and treatments carried out to private houses and refuse tips, with much time being spent on baiting the sewers and sewage works. It was a dry summer and in consequence there was a prolific breeding of rats in some quarters. There were considerable infestations around dwelling houses and refuse tips in the autumn. These were generally successfully treated. The following table shows the extent of the work in figures :

Inspections of private dwellings	1341
Inspections of council dwellings	497
Inspections of farm premises	44
Treatments to private dwellings	262
Treatments to council dwellings	57
Total visits during treatments	987
Number of sewer manholes baited	567
Number of follow-up treatments necessary	1205
Number of treatments to sewage works	84
Number of follow-up treatments necessary	246
Number of treatments to refuse tips	206
Number of follow-up treatments necessary	638
Total mileage covered by the van	8972
Poisons used: 171lbs. Warfarin; 430lbs. Sewer-Warfarin.	
Baits used : 1313lbs. Pinhead Oatmeal.	

**Refuse and Salvage Collection :** The regular weekly collection of household refuse and salvage continued throughout the District, and once again there was little complaint from the public regarding this service. The amount of refuse collected continued to increase with the occupation of new houses in many parishes. The type of refuse now collected shows a vast change from a few years ago. It consists now chiefly of dirty papers, vegetable matter, tins and bottles, and there is very little ash content. Fires on tips have been the cause of much concern and have caused some expense to extinguish. These fires are often started by hot ashes though probably some are started deliberately—perhaps in mischief—and then get out of control.

It has been necessary to work daily overtime in order to keep to the regular weekly schedule of collections. The larger numbers of occupied houses, with the consequent increase in the amount of refuse to be collected has meant more loads to be taken to the various refuse tips and more time spent on the tips at the end of each day. With the present size of refuse collection vehicles and staff there is no alternative if the regular weekly collection is to be maintained. The collection of salvage continued but the market for its sale was almost non-existent, and only £142. 5. 0. was received, though there were signs of a recovery at the end of the year.

**Petroleum (Regulations) Acts, 1928 and 1936:**

Number of licences granted	2
Number of licences renewed	75

**Public Health Act, 1936 (Part X) Canal Boats :** The wharf at Braunston was again very busy during the summer season, with its trade for canal cruising holidays. The old canal-boat builder's yard is now a pleasure craft bay. A few canal boats tie up along the canal-side, their owners usually visiting relations in Braunston. There is now no industrial work connected with canal boats, with the exception of a small dock a short distance away, where some minor repairs are carried out to these boats. These two docks gave some measure of employment to Braunston persons.

# **FACTORIES AND WORKSHOPS ACTS, 1937 to 1961**

## **Annual Report of the Medical Officer of Health in respect of the year 1964 for the Rural District of Daventry in the County of Northants Prescribed Particulars on the Administration of the Act**

### **PART I OF THE ACT**

**1.—INSPECTIONS** for the purposes of provisions as to health (including inspections made by the Public Health Inspector).

Premises	Number on Register	Number of		
		Inspection	Written Notices	Occupiers prosecuted
(i) Factories in which sects. 1, 2, 3, 4, and 6 are to be enforced by Local Authority .....	—	—	—	—
(ii) Factories not included in (i) in which section 7 is enforced by Local Authority .....	66	66	—	—
(iii) Other premises in which section 7 is enforced by the Local Authority (excluding outworkers premises)	—	—	—	—

**2.—CASES** in which defects were found (If defects are discovered at the premises on two, three or more separate occasions they are reckoned as two three or more cases).

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred to H.M. Inspector	by H.M. Inspector	
Want of cleanliness (S1)	—	—	—	—	—
Overcrowding (S2)	—	—	—	—	—
Unreasonable temperature (S3)	—	—	—	—	—
Inadequate ventilation (S4)	—	—	—	—	—
Ineffective drainage of floors (S6)	—	—	—	—	—
Sanitary conveniences					
(a) insufficient	—	—	—	—	—
(b) defective	—	—	—	—	—
(c) not separate for sexes	—	—	—	—	—
Other offences not relating to Outworkers	—	—	—	—	—
Totals	—	—	—	—	—

No lists of Outworkers were received during the year.



**OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963.**

This Act was introduced to establish a standard of health, welfare and safety in relation to the working conditions of persons employed in premises coming within the scope of the Act.

These premises include offices, shops, hairdressers, hotels, public houses, restaurants, transport cafes, canteens, wholesale warehouses and fuel storage depots.

The Act lays a duty on the Local Authority to appoint inspectors to enforce the provisions of the Act, and the Public Health Inspectors have been so appointed by this Council.

Initially, the Act requires that, from 1st May, 1964, all employers of persons in any of the above types of premises must register with the Local Authority. Despite publicity, all applications for registration have not yet been submitted, and for this reason it was decided to undertake a survey of every shop, office, catering establishment etc. in the District in order to provide a full record of those premises coming within the scope of the Act. This survey will be completed in 1965 and detailed inspections of each premises will then be made to secure compliance with the Act.

The provisions of the Act, and the more detailed requirements of the Regulations made thereunder which are enforceable by the Local Authority are briefly as follows:

1. Maintenance of general cleanliness.
2. Provision of adequate working space.
3. Maintenance of a reasonable temperature and provision of a thermometer.
4. Provision of adequate and suitable lighting and ventilation.
5. Provision of suitable and sufficient sanitary conveniences and washing facilities.
6. Provision of an adequate and wholesome supply of drinking water.
7. Provision of suitable and sufficient seating facilities.
8. Provision of suitable and sufficient accommodation, including drying facilities for working and outdoor clothing.
9. Provision of suitable and sufficient eating facilities for the use of employed persons who are required to eat meals on the premises.
10. Construction and maintenance of secure fences on machines to guard against injury.



11. Prohibition of persons under 18 years of age from cleaning machinery if it exposes him to injury from moving parts.
12. Prohibition of any person from working at any machine prescribed by an Order as being dangerous, unless he has received adequate safety training or is under adequate supervision.
13. Prohibition of any person being required to lift or move loads so heavy as to cause injury to him.
14. Provision of a first-aid box to contain specified numbers of dressings etc., depending upon the number of employees and class of premises.
15. Notification of accidents to Local Authority.
16. Construction and maintenance of all floors, passages, stairs etc. to reduce risk of accidents.
17. Display of an Abstract of the Act and Regulations for information of employees.

It will be evident from the above provisions that in addition to the basic conditions for environmental health and welfare, such as space, cleanliness, lighting, ventilation etc., emphasis has now been laid on the safety factor for persons employed in these premises. It is of interest that the machines prescribed by the Order as being dangerous, include mincing, slicing, potato chipping and guillotine machines which can be found in use in most food shops, catering establishments and some offices. It is anticipated that considerable time will require to be devoted to achieving the effective fencing of these machines and to the training of personnel in the safe operation of individual machines.

The Fire Authority and H.M. Factory Inspectorate are also responsible for the enforcement of certain sections of the Act and close liaison is maintained with these Authorities when joint action is required in respect of any premises.

## OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

Annual Report of the Public Health Inspector for the year 1964 for the Rural District of Daventry.

Prescribed Particulars on the Administration of the Act.

TABLE 1. REGISTRATIONS AND GENERAL INSPECTIONS

Premises	Premises	Number of Inspections	Employees
Offices	14	6	129
Retail Shops	39	36	153
Wholesale Shops, Warehouses	4	nil	19
Catering Establishments, Canteens	12	7	282
Fuel Storage Depots	nil	nil	nil
	—	—	—
TOTALS	69	49	583

TABLE 2. NUMBER OF VISITS OF ALL KINDS BY INSPECTORS TO REGISTERED PREMISES

69

TABLE 3. EXEMPTIONS

nil

TABLE 4. PROSECUTIONS

nil

TABLE 5. INSPECTORS

No. of Inspectors appointed under Sections 52 (1) or (5) of the Act	(Existing Staff) 2
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No. of other staff employed for most of their time on work in connection with the Act	nil
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NOTE.—At present only part of the time of one of the above inspectors can be devoted to work in connection with the Act.

## SECTION D

### HOUSING

During the year 18 new council dwellings were completed and occupied as compared with 6 the previous year.

There was an increase in the number of council dwellings becoming vacant and being re-let. The figure was 55, compared with 39 the previous year. So that 73 council dwellings were allocated, in some part for slum clearance work and the remainder to the waiting list.

The waiting list at the end of the year showed 564 applicants wanting council house accommodation. There were 119 fresh applications registered during the year. Of the total number of applicants, 104 are from persons already living in a council house, but wanting exchange to either a bungalow or a different type house, while 218 were from persons living outside the district.

Steady progress was maintained in connection with dealing with unfit properties in the District. A progress report is given in a later page of this report.

It is pleasing to report that 252 privately owned houses were completed and occupied during the year. The parish statistics given earlier in this report show where the greatest progress has been made, and at the end of the year a further 120 privately owned houses were in course of erection.

The new council dwellings completed and occupied were:—4 at Barby; 2 at Crick; 8 at Long Buckby; 2 at Woodford Halse and 2 at Yelvertoft.

New council house dwellings in course of erection were:—4 at Byfield; 4 at Everdon; 6 at Watford and 8 at West Haddon.

Council houses re-let by parish representatives	55
Council house tenants given permission to take in a lodger	12
Council house tenants refused permission to take in a lodger	6
Internal exchanges of council houses permitted	13
External exchange of council house permitted	1
Council house tenancies transferred	4
Council garages re-let	3

## HOUSING (FINANCIAL PROVISIONS) ACT, 1958

## HOUSE PURCHASE AND HOUSING ACT, 1959

## HOUSING ACT, 1961, HOUSING ACT, 1964

The year showed an increase in the number of applications for “ Discretionary Grant ” and “ Standard Grant.”

The summaries given below show the amount of work which has been necessary for the approval of applications and then later for inspecting the completed works and approving payment of grant.

<b>Discretionary Grant</b>	
Number of applications received	18
Number of applications not approved	2
Applications approved for grant aid	16
Total cost of improvements approved (of this total the Council contribute 25 per cent. and the Ministry the remainder)	£5315
Total estimated cost of works approved	£13,509

Since the Act came into force 302 applications have been received for grant. Of these 19 were withdrawn by the applicants; 54 were not approved due to failure to comply with the requirements of the Act; 229 have been approved costing some £54,231 in Improvement Grant. By the end of the year works in respect of 199 applications had been completed and grant paid.

### **Standard Grant**

The number of applications received was 46, which was 12 more than for the previous year. All were approved by the Council. Of this number 33 applications were made by owner-occupiers and 13 applications made by owners of tenanted houses. These approved grants showed a total amount of grant to be paid as £6,225. By the end of the year 229 applications for Standard Grant had been approved by the Council since the Act came into force, and totalling £30,755 in grant aid to be paid. Further, at the end of the year, works in respect of 163 applications had been completed and grants paid.



## HOUSING ACTS, 1936-57

### 1.—Inspection of dwelling houses during the year:

(a) Total number of dwelling houses inspected for housing defects under the Public Health and Housing Acts	942
(b) Inspections made for the purpose	1085
(c) Number of dwelling houses (included in the sub-head above) which were inspected and recorded	102
(d) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	40
(e) Number of dwelling houses (exclusive of those referred to under the preceeding sub-head) found not to be in all respects reasonably fit for human habitation	62

### 2.—Remedy of defects during the year without service of formal notice:

Number of dwelling houses rendered fit in consequence of informal action by the Public Health Inspector	57
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### 3.—Action by the Local Authority under the Housing and Public Health Acts by serving of informal notices:

(a) under the Housing Act	
Number of houses requiring defects to be remedied	21
Number of houses, repairs carried out by owners	21
Number of houses repaired by Local Authority	nil
(b) Under the Public Health Act	
Number of houses requiring defects to be remedied	23
Number of houses, defects remedied by owners	22
Number of houses, defects remedied by Local Authority	nil

### 4.—Proceedings under sects. 16 and 17 Housing Act, 1957:

(i) Number of demolition orders made	13
(ii) Number of houses demolished in respect of demolition orders	13
(iii) Number of houses demolished where undertakings had been accepted	4
(iv) Number of houses where undertakings were accepted	1
(v) Number of undertakings cancelled, dwellings being made fit	7
(vi) Number of houses upgraded to either category '1' or '2' repairs and improvements having been carried out	8
(vii) Number of Closing Orders made for separate dwellings	15
(viii) Number of dwellings demolished after Closing Orders had been made	3
(ix) Number of dwellings in respect of which Closing Orders were determined	4
(x) Number of dwellings put to some other use	1
(xi) Number of dwellings voluntarily demolished by owners after informal action	2

The numbers of dwellings dealt with during the year, for the first time are shown at (i); (iv); (vi); (vii); (x) and (xi).

**Overcrowding:** As the result of the Council's own re-housing it was known that 6 cases of overcrowding, involving some 26 persons, were abated.

## HOUSING ACTS 1936—57

No Clearance Areas were made by the Council during the year. Slum Clearance work was again carried out under sections 16 and 17 of the Housing Act, 1957, either as Individual Demolition Orders, Closing Orders or Undertakings given by owners. The year's work is shown on the previous page of this report.

The following table shows the progress of dealing with unfit houses in the District since mid 1955 to 31st December 1964:—

(a) Houses dealt with in Clearance Areas	84
(b) Houses in Clearance Areas and now demolished	80
(c) Houses in Demolition Orders	124
(d) Houses in Demolition Orders, now made fit	4
(e) Houses in Demolition Orders and demolished	88
(f) Houses in respect of which Closing Orders were made	156
(g) Houses dealt with as Closing Orders, now made fit	42
(h) Houses dealt with as Closing Orders, now demolished	34
(i) Houses in respect of which Undertaking were accepted	137
(j) Houses in respect of which Undertakings were cancelled, the houses being made fit	56
(k) Houses where Undertakings were accepted but demolished	38
(l) Houses voluntarily demolished after informal action	33
(m) Houses upgraded repairs and improvements carried out	151

The Council submitted two five year plans for dealing with unfit houses in the District in August 1955 and 1960. These plans outlined a total programme of 522 unfit houses. At the end of 1964 however, the figure of 688 houses was obtained. The clearing of a large number of these houses was achieved without the new building of council houses as each house was dealt with as it became vacant. This rate of progress was reasonably satisfactory, though it is estimated that at the end of the year a further 400 unfit houses remained. A number of these were often owner occupied and by elderly persons. These are usually cleared as they become vacant. The figures shown in the table at (a); (c); (f); (i); (l) and (m) give the total number.

## INSPECTION AND SUPERVISION OF FOOD

**Milk Supply:** The Milk and Dairies (General) Regulations, 1959, were in force and brought earlier regulation into line with modern methods of milk production.

The enforcement of the Regulations is the responsibility of the Ministry of Agriculture, Fisheries & Food, and as regards distribution and infected milk, the Local Authority.

The Milk (Special Designations) Regulation, 1963, came into force during the year. These Regulations made alterations in the labelling of milk in bottles and containers, the main alteration being the discontinued use of the designation 'Tuberculin Tested'. The labelling of bottles and containers now has to be:— 'Untreated Milk'; 'Pasteurised Milk' or 'Sterilised Milk'. The majority of the Dealers gave up the sale of 'Untreated Milk' and now only sell 'Pasteurised' or 'Sterilised'. Sixteen licences to sell 'Pasteurised Milk'; 2 licences to sell 'Untreated' and 4 to sell 'Sterilised Milks' were issued. Some producer-retailers, retain the use of the designation 'Untreated', they are licensed by the Ministry. Supplies were generally satisfactory throughout the District. 4 large suppliers operate in the District and cover a large area in their operations, they do not have their dairies in the District.

**Bakehouses:** There were still 4 bakehouses operating. These were frequently inspected and in two cases informal action was necessary for the cleansing and lime-washing.

**Shops:** These were generally satisfactory. The survey of shops under the Offices, Shops and Railway Premises Act had commenced. Cafes were inspected at frequent intervals.

Types of Shops, etc., in the Rural District :—

Bakehouses with shops	4
Bank branch offices	5
Betting Shops	5
Boots and Shoes only	3
Butchers' Shops	19
Cafes	10
Canteens	12
Cats' Homes	2
Chemists	2
Clubs	5
Confectionery only	2
Cycles only	2
Dogs Homes	4
Drapery only	9
Fire Stations	2
Fish Shops	3
Furniture	5
General Stores	65
Hardware only	3
Hairdressers	10
Hostels	2
Home for Blind Children	1
Nurserymen	3
Off-Licence with General Stores	1
Paints, etc. only	2
Post Offices only	5
Post Offices with General Stores	22
Post Office with Public House	1
Public Houses only	55
Police Houses	9
Slaughter-houses	4
Stationery, Sweets, etc.	2
T.V, Wireless, etc.	5
Upholsterer	1



## MEAT :

Four slaughterhouses were in constant use throughout the year. The appointed day, made by the Minister of Agriculture, Fisheries and Food was 1st April. The new slaughterhouse at Crick came into use very early in the year. A considerable amount of time has been spent in the slaughterhouses, examining carcase meat before sale to the public, as the table given later will show. The Meat Regulations 1963 were in force, and all animals slaughtered in the District were inspected and stamped before passing to the shops. A number of the butchers buy their meat wholesale. Daily inspections were made at Crick. All butchers shops were regularly visited. No unsound meat was found exposed for sale. Sixteen licences to slaughter animals were renewed.

The table following shows the carcasses inspected and the incidence of any disease evident at those inspections:—

	Cattle Exclud Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed .. .. .	1771	79	15	11030	3388
Number inspected .. .. .	1771	79	15	11030	3388
<b>All Diseases except Tuberculosis and Cysticerci:</b>					
Whole carcasses condemned ..	1	—	2	12	2
Carcasses of which some part or organ was condemned .. .. .	310	6	—	280	103
Percentage of the number inspected affected with disease other than tuberculosis or cysticerci .. ..	17.6	7.6	13.3	2.6	3.1
<b>Tuberculosis only:</b>					
Whole carcasses condemned ..	—	—	—	—	—
Carcasses of which some part or organ was condemned .. .. .	—	—	—	—	15
Percentage of the number inspected affected with tuberculosis ..	—	—	—	—	.44
<b>Cysticercosis: only</b>					
Carcasses of which some part was condemned .. .. .	7	—	—	—	—
Carcasses submitted to treatment by refrigeration .. .. .	7	—	—	—	—
Generalised and totally condemned	—	—	—	—	—
Weight of meat condemned	500lbs.	—	183lbs.	457lbs.	664lbs.
Weight of offal condemned	3045lbs.	93lbs.	20lbs.	410lbs.	310lbs.

Total weight of meat and offal condemned was 2 tons 10 cwts. 2 qtrs. 26 lbs.

There was no slaughtering of horses for human consumption.

## SECTION F.

### PREVALENCE OF AND CONTROL OVER INFECTIOUS AND OTHER DISEASES

160 cases were notified, showing a considerable decrease on last year's figure of 344 cases. This was due to the decrease in measles notifications, which continues its biennial incidence.

The year figures have been satisfactorily low for other types of infectious disease. There was 1 case of dysentery, 5 cases of food poisoning, and no cases of poliomyelitis.

**Measles**—Numbers notified decreased from 300 last year to 76. This disease though highly infectious is now, like scarlet fever, of a benign character, seldom showing serious complication. However, in the more delicate and occasionally in normal children, the unpleasant complications of eye, ear or lung infection still occur. These, however, are usually soon and successfully dealt with by the large number of effective antibiotics that are now available.

**Whooping Cough**—A slight decrease in notifications. The County Council and many general practitioners have now adopted the method of early immunisation to this illness, starting at 2-3 months, and it is to be hoped that there will be fewer cases of this disease which, when it attacks in early infancy, can be distressing and often dangerous.

**Scarlet Fever**—The illness was, without exception, very mild and no serious complications resulted. There were 6 cases notified.

**Poliomyelitis**—No cases occurred. This gratifying incidence continues and now, with large numbers immunised, it is to be hoped that there will be a steady decline in occurrence and severity of this infection. It has been found that with immunisation of a high percentage of the population there is a decline of circulating virus in the community and though themselves not immunised this helped to protect other members of the community from infection.

**Dysentery**—Only one case occurred.

**Food Poisoning**—There were 5 cases notified. All were single cases and the illness was not severe. This was, fortunately, a low incidence in the district. The condition is usually caused by one of the *Salmonella* organisms the commonest being the Typhimurium strain or paratyphoid A or B. The *Staphylococcus* gaining an entry to food from an infected spot or boil on the hands, arms, or face of a food handler may also cause a severe form of food poisoning. Some chemical contaminants can be an occasional cause. More rarely, Typhoid fever and botulism may occur. However, the commonest form of food poisoning is the *Salmonella* gaining entry into food by faulty hygiene of food handlers. The sources of infection can be numerous, uncooked contaminated (often imported) meat being today probably one of the commonest.

**Typhoid Fever**—There were no cases.



**ABERDEEN TYPHOID OUTBREAK** — During the summer months 500 cases of typhoid fever occurred in Aberdeen. Infection took place from a contaminated 6lb can of corned beef manufactured in the Argentine and sliced on a meat slicer in a supermarket in Aberdeen. Cans from the batch of infected meat had been distributed throughout the country and it became necessary to trace these and withhold them from sale to the public. All such cans in this district were found and withdrawn. This necessitated much extra work and repeated visits to food stores as further batches were notified and had to be checked.

**ZERMATT TYPHOID OUTBREAK**—The possibility that holidaymakers returning from ski-ing at Zermatt had been infected with typhoid and had become symptomless carriers made it necessary to endeavour to trace any such persons, particularly if any of them were employed in the food trade. The Press assisted by publishing that information was required and other efforts were made to trace these persons. None were found in this district.

**Influenza**—One death was recorded. The number of cases during the year was not known.

**Bronchitis**—Eight deaths were recorded.

**Pneumonia**—Eight deaths were recorded.

*Respiratory infection continues to be a cause of much ill-health and chronic suffering. A very marked decline in deaths from pneumonia has taken place since the discovery of the sulphonamides and antibiotics, but in chronic sufferers from bronchitis and in the aged and debilitated some cases do still prove fatal.*

The incidence of chronic nasal catarrh often with the later development of sinusitis is still an all too common occurrence. Many school-children still suffer from nasal catarrh. The cause is obscure and the need for research into this problem continues to be stressed.

**Smallpox**—No case occurred.

**Infective Hepatitis**—There was one case—in July—from Ashby St. Ledgers. The Minister of Health gave sanction that this disease should be made locally notifiable as from 1st July, 1962. By arrangement with other District Councils this also became operative in the County of Northamptonshire. Acute Infective Hepatitis is a disease caused by a virus which attacks the liver and causes jaundice. It is mainly an infection of young people, of faecal-oral spread, with an incubation period of 15-25 days. The incriminative routes of infection are from food handlers, water, and children to their mothers. The virus is present in faeces 16 days before jaundice and up to 8 days after. Serum hepatitis, which is another form of infective hepatitis, has a longer incubation period of 50—160 days. It affects adults mainly and can be spread by blood transfusion and inefficiently sterilised equipment used by doctors, dentists, nurses, and drug addicts, and in the various tattooing processes. The clinical groups of these two types of hepatitis are indistinguishable. There is no specific treatment and an icteric adult may be away from work from six weeks to two months, and sometimes might not feel really fit for a year. Quarantine measures are of little value and patients can be treated at home or in hospital provided adequate hand-washing techniques are practised with current disinfection of excreta. Serum hepatitis can be virtually abolished if disposable equipment were generally introduced. In this County disposable equipment is used by the County Health Department for all procedures involving immunisation. Gamma Globulin is of value for the protection of close contacts and pregnant women during epidemics.

## Period Distribution of Notified Cases of Infectious Disease

Disease	January	February	March	April	May	June	July	August	September	October	November	December	Total
Measles	2	—	1	1	—	2	18	1	1	—	4	46	76
Whooping Cough	—	—	—	—	3	2	3	5	3	—	—	—	16
Scarlet Fever	—	2	4	—	—	—	—	—	—	—	—	—	6
Dysentery	—	1	—	—	—	—	—	—	—	—	—	—	1
Encephalitis	—	—	—	—	—	1	—	—	—	—	—	—	1
Infective Hepatitis	—	—	—	—	—	—	1	—	—	—	—	—	1
Food Poisoning	—	—	—	—	—	—	2	1	—	1	—	1	5
Totals	2	3	5	1	3	5	24	7	4	1	4	47	106

## Parish Distribution of Infectious Diseases

PARISH	<i>Measles</i>	<i>Whooping Cough</i>	<i>Scarlet Fever</i>	<i>Dysentery</i>	<i>Encephalitis</i>	<i>Food Poisoning</i>	<i>Infective Hepatitis</i>	Total
Ashby St. Ledgers ..							1	1
Badby .. ..	2					1		3
Barby .. ..	15							15
Braunston .. ..	3				1	1		5
Byfield .. ..	2			1				3
Clay Coton .. ..	1							1
Crick .. ..	1							1
Elkington .. ..	1							1
Everdon .. ..						3		3
Lilbourne .. ..	1	7	1					9
Long Buckby .. ..		7	5					12
Stanford .. ..	1							1
Weedon .. ..	1	2						3
West Haddon .. ..	15							15
Yelvertoft .. ..	33							33
Totals	76	16	6	1	1	5	1	106



**Tuberculosis**—Vaccination is offered against tuberculosis by the County Council to all children at 13 years of age. This is carried out in the schools and there is a high acceptance rate.

There were 4 new cases notified during the year—1 male and 3 females. All were pulmonary cases. In addition there were 4 inward transfers, 2 males and 2 females—all pulmonary cases. Two notified cases of tuberculosis died during the year, although only one case is shown by the registrar as of death primarily caused by tuberculosis.

**CASES ON THE REGISTER AND OTHER RELEVANT DETAILS REGARDING TUBERCULOSIS FOR 1964**

	MALE		FEMALE		TOTAL
	Respiratory	Other	Respiratory	Other	
Cases at Dec. 1963 ..	26	5	18	12	61
Notified 1964, including Inward Transfers	3	—	5	—	8
Total of 2 columns above	29	5	23	12	69
LESS: Those Cured (A)	1	—	—	—	1
Deaths— (B)	—	—	2	—	2
Total of (A) : (B) : (C)	1	—	2	—	3
Cases remaining on Register at December 1964	28	5	21	—	66

**Age Groups of New Cases and Inward Transfers**

	MALE	FEMALE
	Respiratory	
20—25 years		I
25—35 years		I
35—45 years		I
55—65 years	I	
Inward Transfers		
25—35 years	I	I
55—65 years	I	I

## VACCINATION AND IMMUNISATION

Children are offered protection to the following diseases:—Diphtheria, Whooping Cough, Tetanus, Poliomyelitis, and Smallpox.

These immunisations are done either at County Council clinics or by General Practitioners.

A list of County Council Child Welfare Clinics held in this area is shown below:—

1 West Haddon	2nd Tuesday of month
2 Weedon	3rd Tuesday of month
3 Woodford Halse	3rd Wednesday of month
4 Long Buckby	4th Wednesday of month

In addition the mobile clinic operates twice a month in the district and mothers from the following villages can attend:—Norton, Staverton, Badby, Newnham, Everdon, Preston Capes, Charwelton, and Whilton on the 4th Monday of the month, while those from Yelvertoft, Lilbourne, Elkington, and Winwick attend on the 4th Wednesday of the month.

Figures for the district are not available this year, but will be included in the County Council statistics.

**DIPHTHERIA.**—There has been no case of diphtheria in Northamptonshire since 1956. There is, therefore, with every successive year of freedom from infection a diminishing public recollection of the dangers of this disease. Mothers without knowledge of this illness feel a false security and may fail to have their children immunised. That this is a dangerous situation cannot be too strongly stressed, and only by keeping up the number of children immunised may this dread disease be kept at bay. It is the duty of all parents to have their children immunised and if they fail to do so they neglect their children's welfare.

**WHOOPING COUGH.**—This can be a distressing and, in infancy, a serious illness. Protection is given in the form of triple immunisation together with Tetanus and Diphtheria.

**POLIOMYELITIS.**—Once again there have been no cases, and this freedom can be ascribed to immunisation, as the decline in incidence has occurred concurrently with vaccination. The oral Sabin vaccine is now used which gives a longer lasting immunity than the Salk or injected variety. A drink of syrup or a lump of sugar is also much more acceptable to the young patients than the previous needle prick.

**SMALLPOX.**—The vaccination of children is still necessary and should be carried out sometime during the first two years of life, preferably between the first and second year.



